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INFORMATION DISCLOSURE STATEMENT TRANSMITTAL

To Commissioner For Patents

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Application Number	10/541408
Filing Date	20/241400
First Named Inventor	NEGLE et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	DE 030001

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Complete if Known Substitute for form 1449/PTO **Application Number** Filing Date INFORMATION DISCLOSURE First Named Inventor NEGLE et al STATEMENT BY APPLICANT **Art Unit** (Use as many sheets as necessary) **Examiner Name** of 1 Attorney Docket Number DE 030001

Examiner	Cite	Document Number	U. S. PATENT D	Name of Patentee or	Page Columns Lines Mhars
initials*	Cite No.1	Number-Kind Code ^{2 (# known)}	MM-DD-YYYY	Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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